

Supplicant

If you are a representative for any city, county, local, state or federal agency, you are required to reveal this to the attendants, educators, mentors and directors of this Private Native American Church upon entering the premises.

i understand these Natural Earth Based Medical Services, Earth Based Sacraments, Complementary and/or Alternative Health Care Services, Classes, Education and Mentorship which may include, and are not limited to the following may be used on my behalf during my service/session/ceremony:

Native American Healer/ Medicine, Elats Kowat, Itsppi, Lymphology, Instruction/ Education/ Class/ Mentorship, Aromatherapy, Culturally-based Traditional Healing Practices, Music, Art Therapy, Energetic Modalities, Individual Biological therapies such as Supplements, Exercise, Diet, Food, Nutrients, Physical Forces of Heat, Cold, Water, Touch, Light and Color, Frequency, Sound, Magnets, Herbology/ Herbalism, Homeopathy, Therapeutic Touch/ Body Work, Mind-Body Therapeutic Practices, Naturopathy, Neurosciences, Brain Balancing/ Regeneration, Oxidative Therapies, Hormone Balancing, Lymph Drainage, and Regenerative Modalities.

i understand the Practices/Services/Ceremony's/Modalities listed above have been handed down to all members from their teachers to them the way they were handed down to their teachers.

I HAVE READ AND COMPREHEND THE STATEMENTS ABOVE:

ON THIS

ON THIS

DAY OF

DAY OF

IN YEAR OF

IN YEAR OF

AUTOGRAPH:

AUTOGRAPH:

Supplicant	
I AM HERE ON THIS AND ANY SUBSEQUENT VISITS SOLELY ON MY OWN BEHALF T CAN INDIVIDUALLY RECEIVE FROM THESE EARTH BASED VISIT/ CLASS CEREMONY/ SACRAMENT/ TECHNIQUES. AM NOT, IN ANY WAY, A REPRESENT LOCAL, STATE OR FEDERAL AGENCY.	S/ ATTENDANCE/ SERVICES/

IX Amendment, U.S. Constitution

"The enumeration in the Constitution, of certain rights, shall not be construed to deny or disparage others retained by the people."

Notice and Declaration of 9th Amendment Rights

i, the undersigned, hereby declare the following natural and God-given rights, as reserved to the people, under the 9th Amendment to the Constitution of the United States of America and which rights i reserve as follows:

i reserve the right to seek alternative sacraments, services, therapies, counsel, information, recommendations, assessments, evaluations, test and /or treatment(s), regimen (s), or modality(s), ceremony(s), service(s), sacrament(s), from the practitioner, counselor, therapist or doctors of my choice for any health reason or purpose.

i reserve the right to select or reject, but not limited to, any individual(s) as my personal counselor, educator, mentor, instructor, practitioner, therapist whether that individual be a Medical Doctor, Herbalist, Teacher, Chiropractor, Educator, Druggist, Nurse, Naturopath, Iridologist, Colon Therapist, Priest, Pastor, Native American Healer, Native American Practitioner, or Medicine Man or Woman, Relative, Friend, or anyone from the general citizenry who has, or has not, any known formal training or claimed knowledge, education, insights, or qualifications.

i reserve the right to Freedom of Choice in Medicine in its most liberal construction including the right to choose, but not limited by my, own practitioner, counselor, therapist, donate/ offer/. exchange energy and use any instruction, class, mentorship, service, ceremony, sacrament, treatment, therapy, regimen, modality, herb, drug, stone, mineral, food, sound, light, frequency, medicine or health product for any health condition i have or may have as evaluated by Myself, Medical Doctor, Herbalist, Chiropractor, Druggist, Nurse, Naturopath, Iridologist, Colon Therapist, Counselor, Priest, Pastor, Native American Healer or Medicine Man or Woman, Native American Practitioner, Relative, Friend, or anyone from the general citizenry who has, or has not, any known formal training or claimed knowledge, education, insights, or qualifications.

Constructive Notice is hereby given to any people or peoples, person or persons, who receive a copy of this declaration and who, acting under color of any law, intentionally interfere with the free exercise of the rights to me reserved under the 9th Amendment, as enumerated in this document, that they may be in violation of Title 42, U.S.C. 1983 et seq. and Title 18, Section 241.

AUTOGRAPH: DATE: ON THIS DAY OF IN THE YEAR OF ADDRESS: CITY: STATE: ZIP: PHONE: CELL: EMAIL:

PRINT APPELLATION